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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TAN	GERINEWING	INC.
DOCUMENT NUMBER: NØ904	00005908	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
<u>Clifton</u> (Name	Minsley of Contact Person)	
TANGERINE	WING Inc.	<u> </u>
2624 W.	Prospect Rol. (Address)	
Tampa, FL (City/s	33629 State and Zip Code)	· · · · · · · · · · · · · · · · · · ·
Cliff & Tan	agerinewing.org	n)
For further information concerning this matter, ple	ease call:	
Clifton Minsley (Name of Contact Person)	at (919) 302-	1032
(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount mad	le payable to the Florida Department of	State:
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section	Street Address Amendment Section	,
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division of Corporations Clifton Building 2661 Executive Center Ci	rcle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of TANGER INEWING INC. (Name of Corporation as currently filed with the Florida Dept. of State)

N09000005908

(Document Number of Corporation (if known)

TANGERINE	WING	INC.
ne new name must be distinguishable an obreviation "Corp." or "Inc." <u>"Compan</u>	d contain the word " y" or "Co." may not b	corporation" or "incorporated" or t
Enter new principal office address, if rincipal office address MUST BE A STR		2624 W. Prospe Tampa, FL 336
Enter new mailing address, if applica (Mailing address MAY BE A POST OF	ible: FFICE BOX	2624 W. Prospecti Tampa, FL 33629
	_	19MPa/12 03Cox
If amending the registered agent and/ new registered agent and/or the new i	or registered office a	ddress in Florida, enter the name of
	or registered office a registered office addr	ddress in Florida, enter the name of
<u>Name of New Registered Agent:</u>	or registered office acceptance of the second of the secon	ddress in Florida, enter the name of ess:

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary) <u>Title</u> Address Type of Action <u>Name</u> E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Please change the addresses for the following officersto; Minsley, Clifton P, Title P 2624 W. Prospect Rd. Tampa, FL 33629 Elkins, Alexander J, Title VP 2624 W. Prospect Rd. Tampa, FL 33629

The date of each amendment(s	adoption: August 11, 2009
Effective date <u>if applicable</u> :	(date of adoption is required) August 11, 2009
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(s) ral.
There are no members or m adopted by the board of dire	mbers entitled to vote on the amendment(s). The amendment(s) was/were tors.
Dated Au	Chip lest
have	e chairman or vice chairman of the board president or other officer-if director of been selected, by an incorporator—if in the hands of a receiver, trustee, court appointed fiduciary by that fiduciary)
	Clifton Minsley (Typed or printed name of person signing)
	Manager (Title objection signing)
	(Title (Coerson signing)